## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	
WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼
	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee Headway Workforce Solutions Inc.	Date of Public Distribution/Dissemination
Mailing Address 3100 Smoketree Ct.	10 01 2022
Suite 900	Amount
City State Zip Code	500.00
Raleigh NC 27604	Transaction ID : SE.43237 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate)  Category/ Type  004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District: 00
WALKER, HERSCHEL MR., , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought  Disbut 24150.00	Other (specify) ▶
Full Name of Payee Headway Workforce Solutions Inc.	Date of Public Distribution/Dissemination  10 01 2022
Mailing Address 3100 Smoketree Ct.	10 01 2022
Suite 900	Amount
City State Zip Code	500.00
Raleigh NC 27604	Transaction ID : SE.43238 Date of Disbursement or Obligation
Purpose of Expenditure Mileage (Estimate)  Category/ Type  004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District: 00
WARNOCK, RAPHAEL, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought  Disbusyon 24650.00	ursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC	C C00530766	
Check if 24-hour report  48-hour report   New report   Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
Headway Workforce Solutions Inc.	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 3100 Smoketree Ct. Suite 900	Amount	
	40500.00	
City State Zip Code  Raleigh NC 27604	12500.00 Transaction ID : SE.43239	
Purpose of Expenditure	Date of Disbursement or Obligation	
Canvassing (Estimate)  Category/ Type  004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support	Office Sought: House District: 00	
WALKER, HERSCHEL MR., , , Oppose	President X Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought 37150.00	Disbursement For: ☐ Primary ☐ General 2022 ☐ Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Headway Workforce Solutions Inc.	10 01 2022	
Mailing Address 3100 Smoketree Ct.	Amount	
Suite 900	Amount	
City State Zip Code	12500.00	
Raleigh NC 27604	Transaction ID: SE.43240 Date of Disbursement or Obligation	
Purpose of Expenditure Canvassing (Estimate)  Category/ Type  004	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support	Office Sought: House District:00	
WARNOCK, RAPHAEL, , ,	President Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought 49650.00	Disbursement For: Primary   Queen General  Other (specify)   ☐ Primary   General	
(a) SUBTOTAL of Itemized Independent Expenditures	25000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	> 26000.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Gross, Jennifer, , ,  [Electronically Filed] Date Signature	e 10 / 03 / 2022	
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